

(Column 1)

(Column 2)

SMALL ENTITY	
RATE	FEE
X \$ _____ =	\$ _____
X \$ _____ =	_____
X \$ _____ =	_____
TOTAL	

Ord

OTHER THAN  
SMALL ENTITY

RATE	FEE
	1 _____
$x \cdot 1$ _____ =	
$x \cdot 1$ _____ =	
$1 \cdot 1$ _____ =	

MULTIPLE DEPENDENT CLAIM PRESENT

(3) CFR 1.16(d))

\* If the difference in column 1 is less than zero, enter '0' in column 2

(Column 1)

(Column 2)

(Continued)

AMENDMENT A	(Column 1)		(Column 2)		(Column 3)
	CLASAS REMANING AFTER AMERICANIZATION	STATUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	STATUS	PRESENT CLASS
TOTAL (12 CLASAS)	72	CLASS	20	CLASS	-
Independent (12 CLASAS)		CLASS	3		

### SMALL LIVITY

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OTHER THAN  
SMALL ENTITY

DATE	AMOUNT	INITIALS
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SMALL ENTITY	
PAID	ADDITIONAL FEE
NO.	
NO.	
NO.	
TOTAL	
ADDITIONAL FEE	

AMENDMENT B	(Column 1)		(Column 2)		REMARKS
	CLAIMS DEPENDENT AFTER ALLOCATION		HIGHEST NUMBER PREVIOUSLY PAID FOR		
11/2/06	Total (32 CFR 156.1)				
Independent (32 CFR 156.2)	7	Admns	20		
	2	Grants	3		

PRESENTERS OF MULTIPLE DEPENDENT CLAIMS (32 CFR 156.1)

[illegible]

	DATE	ADDITIONAL FEE
1987	1 1 1	
1987	1 1 1	
1987	1 1 1	
1987	1 1 1	
	TOTAL	ADDITIONAL FEE

AMENDMENT C	(Column 1)		(Column 2)		(Column 3)
	CLAIMS EXAMINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESCH EXTRA	
Total of CFP 1 1988	1	Elmox	1	1	
Independent of CFP 1 1988	1	Elmox	1	1	

FIRST PRESENTATION OF MULTIPLE EXEMPTION CLAIMS (1: CFP 1 1988)

DATE	AMOUNT PAID
1. 1	1.00
2. 1	2.00
3. 1	3.00
TOTAL	6.00

P-1	ADDITIONAL FEE
P-1	
P-1	
P-1	
P-1	
P-1	

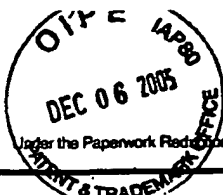
\* If the entry in column 1 is less than the entry in column 2, write "0" in column 4.

... If the "Highest London Previously Paid For" (HLPF) is less than 20, edge 20.

The 'Highest Number of Records Paid for' (HNY SPAC) is less than 1,000.

Collection of information is required by 41 CFR 101-11.6. The information is required to be provided to the Department of the Interior, Bureau of Land Management, and the Department of the Interior, Bureau of Reclamation.

[illegible]



ENTER  
W/RCF  
1/12/06  
PI

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	10/666,911
	Filing Date	September 19, 2003
	First Named Inventor	Shinojima Kazumoto
	Art Unit	2883
	Examiner Name	Erin D. Chiem
Total Number of Pages in This Submission	Attorney Docket Number	9319S-000551

ENCLOSURES (check all that apply)				
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply  <input checked="" type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/Incomplete Application  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Return Receipt Postcard</b>		
<table border="1"><tr><td>Remarks</td><td>The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-3213. A duplicate copy of this sheet is enclosed.</td></tr></table>			Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-3213. A duplicate copy of this sheet is enclosed.
Remarks	The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-3213. A duplicate copy of this sheet is enclosed.			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name G. Gregory Schivley Bryant E. Wade	Reg. No. 27,382/40,344
Signature			
Date	December 6, 2005		

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.			
Typed or printed name	G. Gregory Schivley/Bryant E. Wade	Express Mail Label No.	EV 717 344 450 US (12/6/2005)
Signature		Date	December 6, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  
If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

EV 717 344 450 US